APPLICATION TO PRACTICE

UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF TEXAS

1.	Name:			
		(as listed	l on State Bar Card)	
2.	Home Add	lress:		
		(Street or P.O. Box)	(City-State-Zip)	
3.	Telephone	: Home: <u>(</u>)	Office: ()	
4.	Firm Nam	e:		
5.	Firm Addr	ess:		
		(Street or P.O. Box)	(City-State-Zip)	
6.	Date of Bi	rth:	_	
7.	Identify a s	state bar of which you are admitte	d.	
			State Bar No:	
8.	Identify a United States District Court bar of which you are a member.			
			Number:	
9.	Please list	Please list areas of certification:		
10.		st ten years you have been the sub final disposition.	eject of discipline by a court or bar, attach a description and a	
11.	Attach an explanation of any conviction, in the last ten years, of a misdemeanor involving moral turpitude or any felony.			
12.	If you responded to iten ten or eleven, attach all information you feel would assist the court in determining your fitness to practice law in this district.			
13.	you for at l		Il state that (a) they are not related to you; (b) they have known know you well; (c) they have read this application; and (d) the haracter to be good.	
	A. Reference's name, office address, state bar number and telephone number:			
	B. Reference's name, office address, state bar number and telephone number:			
	Subscribed	under the penalty for perjury.		
			Applicant	
			Date	